

SCHEDULE A-P **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

PAGE 7020 / 111892

<input type="checkbox"/> 16	<input checked="" type="checkbox"/> 17a	<input type="checkbox"/> 17b	<input type="checkbox"/> 17c	<input type="checkbox"/> 17d	<input type="checkbox"/> 18
<input type="checkbox"/> 19a	<input type="checkbox"/> 19b	<input type="checkbox"/> 20a	<input type="checkbox"/> 20b	<input type="checkbox"/> 20c	<input type="checkbox"/> 21

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NAME OF COMMITTEE (In Full)

DONALD J. TRUMP FOR PRESIDENT, INC.

A. Full Name (Last, First, Middle Initial)

CABLE, MARIA, , ,

Mailing Address 2795 E ELMWOOD PL

City

CHANDLER

State

AZ

Zip Code

85249

FEC ID number of contributing
federal political committee.

C

Name of Employer
THE HOME DEPOT

Occupation
ON MEDICAL LOA

Receipt For: 2020

☒ Primary ☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

45.00

Transaction ID : SA17A.111999

Date of Receipt

05 / 15 / 2020

EARMARKED THROUGH WINRED [SA17A.4825]

Amount of Each Receipt this Period

25.00

☐ Memo Item

B. Full Name (Last, First, Middle Initial)

CABLE, STEVEN, , ,

Mailing Address 1100 SHONTO PL

City

HENDERSON

State

NV

Zip Code

89015

FEC ID number of contributing
federal political committee.

C

Name of Employer
ENTREPRENEUR

Occupation
ENTREPRENEUR

Receipt For: 2020

☒ Primary ☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

51.00

Transaction ID : SA17A.357417

Date of Receipt

05 / 19 / 2020

EARMARKED THROUGH WINRED [SA17A.4829]

Amount of Each Receipt this Period

51.00

☐ Memo Item

C. Full Name (Last, First, Middle Initial)

CABO NIKOLOV, AIMEE, , ,

Mailing Address 15202 SW 80TH AVE

City

PALMETTO BAY

State

FL

Zip Code

33157

FEC ID number of contributing
federal political committee.

C

Name of Employer
IMIC

Occupation
PRESIDENT

Receipt For: 2020

☒ Primary ☐ General

☐ Other (specify) ▼

Election Cycle-to-Date ▼

100.00

Transaction ID : SA17A.357419

Date of Receipt

05 / 24 / 2020

EARMARKED THROUGH WINRED [SA17A.4841]

Amount of Each Receipt this Period

100.00

☐ Memo Item

Subtotal Of Receipts This Page (optional).....

176.00

Total This Period (last page this line number only).....